FOR INSTRUCTIONS, SEE BACK OF FORM		FORM	SIAIEMENI
CHECK ONE.		DR-1	OF
This is an initial* Statement of Organization  This is an amended* Statement of Organization  This is an amended* Statement of Organization  *An initial Statement of Organization must be filed within 10 days of the committee's accepting contributions, making expenditures, or incurring indebtedness exceeding \$750. Amendments must be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization. A candidate with an open		(Rev. 04/2008)	ORGANIZATION
		For Office Use Only	
		Comm. #	
		Audited	
committee that exceeds \$750 in activity for another office shall file within 10 days either a new or amended		Computer	
DR-1 disclosing information concerning the campaign for the new office sought.			
COMMITTEE NAME 1 (A candidate's committee must include the candidate's last name in the name of the committee.)			
COMMITTEE TO ELECT BOB BECK			
IMPORTANT: Indicate type of committee you are reporting for: 5			
(1)Statewide/Lagislative/Judge Standing for Retention Candidate (2)Statewide PAC (3)State Party (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political Subdivision Candidate (8)County PAC (9)City PAC			
(5)County Candidate (6)City Candidate (7)School Board of Other Political Subdivision Candidate (6)County FAC (5)City FAC (10)School Board or Other Political Subdivision PAC (11) Local Ballot Issue (including committee involved in multiple city/county ballot issues)			
MAA.			
COMMITTEE TREASURER (mandatory for all committees)	Name   Name		
ALICIA KELLEY		LISA KLEINKO	OPF
Mailing Address ↓ ↓ 17984 135TH ST	Mailing Address ↓ ↓	414 S FIRST	
City, State ↓ ↓ Zip Code ↓ ↓ DANVILLE IA 52623	City, State ↓ ↓ Zip Code ↓	DANVILLE IA	52623
Phone (319) 392-4700	Phone (319) 759-5606		
e-Mail akeiley@danvilletelco.net	e-Mail Imkc21@aol.com		
INDICATE PURPOSE OF COMMITTEE - Check One Box  Adv. Comment or description:		Advocate for ballot ise Advocate against ball	
All Candidates Enter: CUDEDVICOD	County/Local Candidates	and Local Ballot Co	mmittees Enter:
Political Party (if applicable) DEMOCRATIC	County: DES MOINES	3	
Political Party (if applicable)	(If active in multiple ballot is		list of counties
Year Standing for Election: 2008	Date of Election: 06/03/0	~	
Bank Account Name (must match committee name)	Candidate name & Address or		
Bank Account Name (must match committee name)  COMMITTEE TO ELECT BOB BECK		Parent Entity (PACs Affiliate, or Sponso	
Bank Account Name (must match committee name)	<b>1 1</b>		
Bank Account Name (must match committee name)  COMMITTEE TO ELECT BOB BECK	BOB BECK		
Bank Account Name (must match committee name)  COMMITTEE TO ELECT BOB BECK  Name of Financial Institution/type of Account	BOB BECK  Mailing Address		
Bank Account Name (must match committee name)  COMMITTEE TO ELECT BOB BECK  Name of Financial Institution/type of Account  DANVILLE STATE SAVINGS BANK	BOB BECK Mailing Address ↓ ↓ 19371 ROOSEVELT ST	Affiliate, or Sponso	
Bank Account Name (must match committee name)  COMMITTEE TO ELECT BOB BECK  Name of Financial Institution/type of Account  DANVILLE STATE SAVINGS BANK  Mailing Address  109 N MAIN ST  City  State  Tip	BOB BECK  Mailing Address	Affiliate, or Sponso	
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Bank Account Name (must match committee name)  COMMITTEE TO ELECT BOB BECK  Name of Financial Institution/type of Account  DANVILLE STATE SAVINGS BANK  Mailing Address  109 N MAIN ST  City  State  State  Tip  Tip  The committee and all persons connected with the committee understand the rules in Chapter 351 of the lowa Administrative Code.	BOB BECK  Mailing Address	State 1 1  Co.net	Zip ↓ ↓ 68B and the administrative
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BECK